

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Matthew R. Arnold, et al.

Examiner: Kuo-Liang J. Tang

Serial No: 09/703,316

Art Unit: 2122

Filed: November 1, 2000

Docket: YOR920000358US1 (13735)

For: SYSTEM AND METHOD FOR
ADAPTIVELY OPTIMIZING
PROGRAM EXECUTION BY SAMPLING
AT SELECTED PROGRAM POINTS

Dated: February 18, 2005

Confirmation No: 1369

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AMENDMENT

Sir:

Responsive to the Office Action of November 18, 2004, Applicants respectfully request the Examiner to reconsider the application in view of the following amendments and remarks.

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 17 of this paper.

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Dated: February 18, 2005


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To: Examiner Kuo-Liang Tang	From: Steven Fischman
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Re: U.S. Serial No. 09/703,316	CC:
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Confirmation No. 1369	
Docket No. YOR920000358US1 (13735)	


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AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. YOR920000358US1 (13735)	
Applicant(s): Matthew R. Arnold, et al.						
Application No. 09/703,316	Filing Date November 1, 2000	Examiner Kuo-Liang J. Tang	Customer No. 23389	Group Art Unit 2122	Confirmation No. 1369	
Invention: SYSTEM AND METHOD FOR ADAPTIVELY OPTIMIZING PROGRAM EXECUTION BY SAMPLING AT SELECTED PROGRAM POINTS						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
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TOTAL CLAIMS	54 -	54 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-0510/IBM <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: February 18, 2005			
Steven Fischman Registration No. 34,594 SCULLY, SCOTT, MURPHY & PRESSER 400 Garden City Plaza, Suite 300 Garden City, New York 11530 (516) 942-4343						
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INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
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